

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 08/01/2011

(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois) *	Percent Change (+or-) **
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damag Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation	317,400	-2.6
Life of Insurance		

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization):

We submit for your review and approval a -2.6 overall rate decrease. We are adopting NCCI's January 1, 2011 Advisory Rates, Loss Costs, and Rating Values. In addition, we are revising our Loss Costs Multiplier from 2.038 to 2.036.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Harleysville Insurance Company

Name of Company

Eileen Fisher, Senior State Filings Analyst

Official - Title

FILED

AUG 01 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Section 754 EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

RECEIVED
LAH - FCS

SUMMARY SHEET

JAN 31 2011

Change in Company's premium or rate level produced by rate revision effective 08/01/2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD

(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois) *	Percent Change (+or-) **
1. Automobile Liability Private Passenger		
Commercial		
2. Automobile Physical Damage Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation	4,003,070	+0.5
Life of Insurance		

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization):

We submit for your review and approval a +0.5 overall rate increase. We are adopting NCCI's January 1, 2011 Advisory Rates, Loss Costs, and Rating Values. In addition, we are revising our Loss Costs Multiplier from 1.630 to 1.650.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

FILED

AUG 01 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Harleysville Lake States Company

Name of Company

Eileen Fisher, Senior State Filings Analyst

Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 08/01/2011

(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois) *	Percent Change (+or-) **
1. Automobile Liability Private		
Passenger		
Commercial		
2. Automobile Physical Damag		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation	55,156	+0.7
Life of Insurance		

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: _____

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization):

We submit for your review and approval a +0.7 overall
rate increase. We are adopting NCCI's January 1, 2011 Advisory Rates, Loss Costs, and Rating
Values. In addition, we are revising our Loss Costs Multiplier from 1.630 to 1.650.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

FILED

Harleysville Mutual Insurance Company

Name of Company

Eileen Fisher, Senior State Filings Analyst

Official - Title

AUG 01 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 08/01/2011

(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois) *	Percent Change (+or-) **
1. Automobile Liability Private Passenger		
Commercial		
2. Automobile Physical Damag Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation	475,375	+4.7
Life of Insurance		

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: _____

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization):

We submit for your review and approval a +4.7 overall
rate increase. We are adopting NCCI's January 1, 2011 Advisory Rates, Loss Costs, and Rating
Values. In addition, we are revising our Loss Costs Multiplier from 1.304 to 1.403.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

FILED

AUG 01 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Harleysville Preferred Insurance Company

Name of Company

Eileen Fisher, Senior State Filings Analyst

Official – Title

Section 754: EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 08/01/2011

(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois) *	Percent Change (+or-) **
1. Automobile Liability Private Passenger		
Commercial		
2. Automobile Physical Damage Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers Compensation	10,573	-1.2
Life of Insurance		

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory

Organization, specify

organization):

We submit for your review and approval a -1.2 overall rate decrease. We are adopting NCCI's January 1, 2011 Advisory Rates, Loss Costs, and Rating Values. In addition, we are revising our Loss Costs Multiplier from 1.630 to 1.650.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

FILED

AUG 01 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Harleysville Worcester Insurance Company

Name of Company

Eileen Fisher, Senior State Filings Analyst

Official - Title

FILED

SEP 01 2011

Revised - Change in
effective date and
Impact

Form (RF-3)

SUMMARY SHEET
STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Change in Company's premium or rate level produced by rate revision effective September 1, 2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>\$913,508</u>	<u>11.34%</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

NA

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

We are filing to adopt NCCI's January 1, 2011 loss costs adjusted by our revised multiplier of 1.48 for all classes.
This will result in a 11.34% overall increase.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.

Iowa American Insurance Company
Name of Company

Beverly Barber - Compliance
Official - Title

H29219D

FILED

SEP 01 2011

Revised - Change
in Effective Date
and in Impact

Form (RF-3)

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective September 1, 2011

(1) Coverage		(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other <u>Workers Compensation</u>	<u>\$3,523,921</u>	<u>11.34%</u>
	<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

NA

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

We are filing to adopt NCCI's January 1, 2011 loss costs adjusted by our revised multiplier of 1.851 for all classes.
This will result in a 11.34% overall increase.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.

Iowa Mutual Insurance Company

Name of Company

Beverly Barber - Compliance

Official - Title

H29219D

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 8-15-11

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	\$737,524	-9.2
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are filing to adopt the NCCI changes in circular IL-2010-05.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Nationwide Mutual Fire Insurance Company
Name of Company

Marie T. Safreed, State Filing Specialist
Official - Title

FILED

AUG 15 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 8-15-11

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	\$1,927,292	10.8
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are filing to adopt the NCCI changes in circular IL-2010-05.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Nationwide Mutual Insurance Company

Name of Company

Marie T. Safreed, State Filing Specialist

Official - Title

FILED

AUG 15 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 8-15-11

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	\$285,707	27.4
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are filing to adopt the NCCI changes in circular IL-2010-05.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Nationwide Property & Casualty Insurance Company
Name of Company

Marie T. Safreed, State Filing Specialist
Official - Title

FILED

AUG 15 2011

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS